

APPLICATION FOR NOMINATION TO UNITED STATES SERVICE ACADEMIES

Please type or (if necessary) print clearly. Deadline for submission is November 4, 2011.

Name ((Last, First, M):	
Home Address:		
City, County, State, Zip Code:		
Mailing Address (if different from F	Home Address):	
City, County, State, Zip Code:		
Telephone Number: (Home)	((Cell)
Email:		
Social Security Number:	Date	of Birth (Mo/ Day/Year)://
Are you a resident of Oklahoma's 4	th Congressional District?	Are you a U.S. Citizen?
High School Attended:		Graduation Year:
Address:		Telephone:
4th) that you desire to	attend. If you do n clude that academy in	cademies (1st, 2nd, 3rd, and ot wish to be considered for your ranking. It may be to choice.
U.S. Air Force Academy		
U.S. Merchant Marine Academy		
U.S. Military Academy		Attach
U.S. Naval Academy		Photo Here

Father's Name:			
Address:			
Mother's Name:			
Address:			
Has either parent ever served in the military? If so, which branch?			
Has any family member ever attended a Service Academy?			
If so, please list their name(s) and their relation to you:			
Use additional paper if needed on the following questions.			
High School Academic Honors:			
Sports Participation:			
Extracurricular Activities:			
Business Experience, Part-time or Summer Employment:			
College or Post-graduate Prep School:			
Conege of 1 out graduate 1 top denote.			
College Activities and Honors:			

Write a short <u>essay</u> that address the following questions. Please type your essay on a separate sheet of paper.

- 1. Why do you wish to attend a Service Academy?
- 2. What is your family's attitude toward your application to the Academy?
- 3. How would you judge your ability to lead others?
- 4. Which of your extracurricular activities give you the most satisfaction? Why?
- 5. Are you planning to join the military in the event that you do not receive an appointment to an Academy?

I have fully read and understand the requirements and procedures for nomination to a United States Service Academy by Congressman Tom Cole along with the requirements and procedures set forth by each academy to which I am applying. I do hereby apply for nomination with the full intention of serving as a career officer upon graduation.

By signing and submitting this application I acknowledge that Congressman Tom Cole may use my name, likeness, and/or identity along with any biographical data contained in this application or provided to his office, in any media related releases for the purpose of publicizing any nomination or offer of appointment that I may receive.

DATE	SIGNATURE

Return Completed Application To:

CONGRESSMAN TOM COLE
ATTENTION: JOHNNY SANDMANN
SUGG CLINIC OFFICE BUILDING
100 EAST 13TH STREET; SUITE 213
ADA, OK 74820

If you have any questions concerning this application or any portion of the nomination process, please call Johnny Sandmann at 580-436-5375.